

Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	None
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	MULTI-LAYER SLAB PRODUCT MADE OF STONE GRANULES AND RELATIVE MANUFACTURING PROCESS
Attorney Docket Number::	2503-1004
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent	No
Appl.?::	

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: ITALY
Status:: Full Capacity
Given Name:: ALESSANDRO
Middle Name::
Family Name:: GODI
City of Residence:: VERONA
State or Province of Residence::
Country of Residence:: ITALY
Street of Mailing VIA FRANCIA 4
Address::
City of Mailing Address:: VERONA
State or Province of Mailing Address::
Country of Mailing Address:: ITALY
Postal or Zip Code of Mailing Address:: I-37135

Applicant Authority Type:: Inventor
Primary Citizenship Country:: ITALY
Status:: Full Capacity
Given Name:: PIERPAOLO
Middle Name::
Family Name:: TASSONE
City of Residence:: VERONA
State or Province of Residence::
Country of Residence:: ITALY
Street of Mailing VIA FRANCIA 4
Address::
City of Mailing Address:: VERONA
State or Province of Mailing Address::
Country of Mailing Address:: ITALY
Postal or Zip Code of Mailing Address:: I-37135

Correspondence Information

Correspondence Customer Number:: 000466

Representative Information

Representative Customer Number::	000466
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Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/EP00/08181	8/22/00

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
ITALY	MI99A001835	8/26/99	Yes

Assignment Information

Assignee Name::

Street of Mailing Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::